JAN 1 3 2006 510(k) Summary

CryoCath Technologies Inc. SurgiFrost[®] 7cm, 10 cm Cryosurgical Devices plus FrostByte[™] Clamp and Cryosurgical Console

1. SPONSOR

CryoCath Technologies Inc.

16771 Chemin Ste-Marie

Kirkland, Quebec

H9H 5H3, CANADA

Contact Person:

Flor del Pilar Arana.

Director Regulatory Affairs and Official Correspondent

Telephone:

514-694-2380 ext 358

Date Prepared:

December 7th, 2005

2. Device Name

Device Trade Name:

SurgiFrost® 6cm, 7cm and 10cm Surgical

CryoAblation System plus FrostByte[™] Clamp

Common/Usual Name: Cryosurgical system

Classification Name:

Cryosurgical Unit and Accessories

Device Classification: Class II

3. PREDICATE DEVICES

CryoCath Technologies - SurgiFrost® Cryosurgical System (K021010 & K040690)

Endocare Inc. - CryoCare Cardiac Surgical System (K011040)

CryoMedical Sciences - AccuProbe 450, Accuprobe 550/530, Accuprobe 600 series (K973190)

Boston Scientific - Cobra Bipolar System (K023288)

Atricure Inc. - Atricure Bipolar Coagulation System (K020919)

Medtronic Inc. - Cardioblate™ Radiofrequency Ablation System (K013392)

4. DEVICE DESCRIPTION

The SurgiFrost® 7cm and 10cm Cryosurgical Devices plus FrostByte™ Clamp and Cryosurgical Console are intended for minimally invasive cardiac surgical procedures, including the treatment of cardiac arrhythmias. The SurgiFrost® 7cm and 10cm Cryosurgical Devices plus FrostByte™ Clamp and Cryosurgical Console freezes the target tissue and blocks the electrical conduction pathways by creating an inflammatory response or cryonecrosis.

The Intended Use does not change as a result of this special 510(k) submission.

The SurgiFrost[®] 7cm and 10cm Cryosurgical Devices plus FrostByte[™] Clamp and Cryosurgical Console and accessories act together as a System. The system is composed of the following components:

- Cryosurgical Control Panel and Power Cord
- Cryosurgical Console
- Tank Carrier
- Gas Tank Regulator and Wrench
- Gas Hose
- SurgiFrost[®] Cryosurgical Device (Single Use)
- FrostByte[™] Clamp (Single Use)
- Footswitch (optional)

The SurgiFrost[®] Cryosurgical System consists of a compact, easy-to-operate Cryosurgical Console and associated accessories that include SurgiFrost[®] 7cm and 10cm Cryosurgical Probes to deliver cold temperatures to the targeted tissue. The control console operates off standard 120/230 VAC (60/50 Hz) wall power and utilizes inert argon gas. The Cryosurgical Console controls a single-use, disposable SurgiFrost[®] Cryosurgical Probe.

5. INTENDED USE

The SurgiFrost[®] 7cm, 10cm Cryosurgical Devices plus FrostByte[™] Clamp and Cryosurgical Console are intended for minimally invasive treatment of cardiac arrhythmias. The CryoCath SurgiFrost[®] System freezes the target tissue and blocks the electrical conduction pathways by creating an inflammatory response and cryonecrosis.

6. TECHNOLOGICAL CHARACTERISTICS AND SUBSTANTIAL EQUIVALENCE

The SurgiFrost[®] 7cm, 10cm Cryosurgical Devices plus FrostByte[™] Clamp and Cryosurgical Console is substantially equivalent to the predicate devices based on intended use, design, materials, technological, and operational characteristics. The differences between the CryoCath devices are minor and raise no new issues of safety or effectiveness.

7. PERFORMANCE TESTING

Information submitted in this premarket notification for the SurgiFrost[®] 7cm, 10cm Cryosurgical Devices plus FrostByte[™] Clamp and Cryosurgical Console is substantially equivalent to the predicate devices listed.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

FEB 2 1 2008

CryoCath Technologies, Inc. c/o Ms. Flor del Pilar Arana, MBA Director, Regulatory Affairs 16771 Chemin Ste-Marie Kirkland, Quebec Canada H9H 5H3

Re: K053436

Trade Name: SurgiFrost® 6 cm, 7 cm and 10 cm CryoSurgical Devices plus FrostByte™

Clamp

Regulation Number: 21 CFR 878.4350

Regulation Name: Cryosurgical unit and accessories

Regulatory Class: Class II (two)

Product Code: OCL Dated: December 8, 2005 Received: December 9, 2005

Dear Ms. Arana:

This letter corrects our substantially equivalent letter of January 13, 2006.

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Page 2 - Ms. Flor del Pilar Arana, MBA

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to continue marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Bram D. Zuckerman, M.D.

Director

Division of Cardiovascular Devices
Office of Device Evaluation
Center for Devices and

Radiological Health

Enclosure

Indications for Use

K053436

510(k) Number (if known):

Device Name: SurgiFrost [®] 6 FrostByte [™] Clamp and Cryosu		Ocm Cryosurgical Devi	ces plus
Indications For Use: The Sur FrostByte [™] Clamp and Cryosicardiac surgical procedures, in SurgiFrost [®] 6cm, 7cm and 10c Cryosurgical Console freezes to pathways by creating an inflan	urgical Console is noluding the treatr m Cryosurgical De the target tissue at	s intended for minimally ment of cardiac arrhythm evices plus FrostByte [™] C nd blocks the electrical co	invasive ias. The lamp and
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(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED) Concurrence of CDRH, Office of Device Evaluation (ODE)			
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CryoCath Technologies Inc., SurgiFrost® Surgical Cryoabla	Special 510(k) ation System) Cor December 7 th , 2005	NFIDENTIAL Page vi